Please print or type.

W_O # 86- 3732

UNIFORM HAZARDOUS

WASTE MANIFEST

4. Generator's Phone (/18) 204-4330

9. Designated Facility Name and Site Address

5. Transporter 1 (Company Name)

7. Transporter 2 (Company Name)

45 Ewing Str.

ORH-E

Chicago Waste Haulers

PCE Inc. of Missouri

Kansas City, Kansas

Consolidated Edison Co. of N.Y.

STATE OF NEW YORK DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

N Y D 9 8 0 5 9 3 6 3 6 0 0 0 0 0

6. US EPA ID Number

8. US EPA ID Number

10. US EPA ID Number

I L D 9 8 0 7 9 4 9 6 0

5, 6, 5, ش, 6, 9, 0, 8, 9, ط, X ,S

12. Containers

Type

0 ,0 ,3 |T ,P |3 ,4 ,9 ,6 ,0

1. Generator's US EPA No.

3. Generator's Name and Mailing Address Z John J. Newell, Bldg. #82

66 106

Waste Polychlronated Biphenyls

RQ

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

UN/23:5

20th Ave. 3: Street, Long Isl. City, N.Y.

SUPERFUND RECORDS

ALIANA Jiagaportar's ID 649-202 HAINI

Unit

Wt/Vol

P

Di Creneporteria, Phene (344), 349-0310

E Miste Transpondre 1D Jaum ac 19 42 0 nem o mit (A Sell Transmer Brendsgandfree State Fachiev about a south

13.

Total

Quantity

Information in the shaded areas is not required by Federal Law.

Banera'ur Bacttos

Item 12-

#-MC

DIT.

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of Transportation (518) 457-7362. Department the N.Y. and

4-8802

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A T O R b.

Center

Response the National call Immediately emergency or spill ŏ Case

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d. `			in Andres
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	k eraterbegunes chipaketog (de mt al Euglinmenia: Consecution (de market (dage dubica and	u by Now York Siste Degariou	Mil gergagacina i A s
Send Copy "3" to: Consoli	Mewell, Bldg. #82 dated Edison Co. of N. e. 4 3i Str., Long Isl		5
16. GENERATOR'S CERTIFICATION: I hereby declare classified, packed, marked and labeled, and are in all respe regulations and state laws and regulations.	cts in proper condition for transport by high	nway according to applicable interna	tional and national government
Unless I am a small quantity generator who has been exem RCRA, I also certify that I have a program in place to reduce selected the method of treatment, storage, or disposal curre	volume and toxicity of waste generated to the	degree I have determined to be eco	nomically practicable and I have
Printed/Typed Name	Simature	hotion	Mo. Day Year
17. Transporter 1 (Acknowledgement of Receipt of Mate		θ	• • • • • • •
Printed/Typed Name Russ Schults	Signature	Johnson	Мо. Day Year ОВОББ
18. Transporter 2 (Acknowledgement or Receipt of Mate	orials)	\(\frac{1}{2}\)	
Printed/Typed Name	Signature		Mo. Day Yea
19. Discrepancy Indication Space			
20. Facility Owner or Operator: Certification of receipt	of hazardous materials covered by this	s manifest except as noted in I	tem 19.
Printed/Typed Name	Signature C	unning Vin	Mo. Day Year
A Form 8700-22 (Rev. 4-85) Previous edition 18 obsolete.	COPY 4—TSD facility—re	tained by TSD facility	,